## STATE OF WEST VIRGINIA Office of Insurance Commissioner

### **NON-RESIDENT BUSINESS ENTITY**

### INSTRUCTION CHECKLIST

Business entities are expected to be in compliance no later than October 1, 2003. After October 1, 2003, penalties for non-compliance may be enforced.

Procedures effective July 1, 2003

## MAILING ADDRESS FOR APPLICATION WITH FEE:

**PHYSICAL MAILING ADDRESS:** 

Agents Licensing & Education West Virginia Ins. Comm. PO Box 50541 Charleston WV 25305-0541 1124 Smith St Charleston WV 25301

"Business entity" means a corporation, association, partnership, limited liability company, or other legal entity.

"Insurance agency" means an individual, corporation, partnership, association, limited liability company, or other legal entity except for an employee of the individual, corporation, partnership, association, limited liability company, or other legal entity, and other than an insurer or an adjuster as defined by W. Va. Code § 33-12B-1, which employs individuals licensed to engage in activity or whose members engage in any activity be performed only by a licensed individual insurance producer or solicitor. It shall not include sole proprietor or partnerships in which there is only one licensed insurance producer.

You are not required to seek name approval from the Office of the Insurance Commissioner prior to filing application. The insurance commissioner may refuse to grant a license to act as an agency insurance producer proposing to do business under a name which is likely to deceive or mislead the public in this state.

No agency insurance producer may be licensed in West Virginia which has or uses a name so similar to that of any agency insurance producer already so licensed as to cause uncertainty or confusion; except that in case of conflict of names between two agency insurance producers the commissioner may permit or require the newly licensed agency insurance producer to use in West Virginia a trade name that is reasonably necessary to avoid such conflict.

<u>Application</u> : We will accept the NAIC Uniform Non-Resident BUSINESS ENTITY Application. The application is located at <u>www.state.wv.us/insurance</u> or NAIC Forms at <u>www.licenseregistry.com</u> ;
<u>Fees:</u> The licensing fee is \$200.00. Payable by check or money order to the West Virginia Insurance Commissioner. Fee is non-refundable—if application is returned for correction, another \$200.00 fee must be submitted with the application.
<u>Letter of Certification</u> : Include an Original Letter of Certification from your "Home State" which is dated within 90 days of issuance. If home state does not license business entities, a letter to that effect from that insurance department must be attached.
<u>Designated Individual (item #23 on application):</u> An individual licensed producer who is an officer, partner, or director responsible for the insurance agency's or business entity's compliance with the insurance laws and rules of West Virginia.
<u>Lines of Authority (page 2 on application):</u> Business entities will not be licensed by or assigned Lines of Authority.
<u>Legal Business Type and License Registration Type (page 2):</u> Until the application is updated to remove the blacked out areas on the application, circle the applicable category for each column.

<u>Appointment Requirements</u>: A business entity cannot be appointed. All sales, solicitations and negotiations must be conducted through an appointed and individual licensed producer.

Questions: Contact the Agents Licensing & Education at (304) 558-0610. Access the Office of Insurance Commissioner at <a href="http://www.state.wv.us/insurance">http://www.state.wv.us/insurance</a>. Access West Virginia Code at <a href="http://www.legis.state.wv.us/legishp.html">http://www.legis.state.wv.us/legishp.html</a>. Access West Virginia Code of State Rules at <a href="http://www.wvsos.com">http://www.wvsos.com</a>, see Emergency Rule 114-2, effective 5-29-2003.



To ensure you are filing the current version of the application and that the application is complete, please reference the National Insurance Producer Registry web site at www.licenseregistry.com.

# **Uniform Application for Non-Resident Business Entity Insurance License/Registration**

(Please Print or Type)

1 Business Entity Name					ion/Formati		3 FEIN	
(4) If assigned, National Produce	r Number (NP#)	(C)				ear) ration Deposit	ory (CRD) Number	
O II assigned, Ivational Troduce	r rumber (rum)	0.	applicable, 14715	D I IIII CO	itiai Regist	ration Deposit	ory (CRD) Number	
6 List any name under which y	ou are doing business	⑦ State	e of Domicile		8 Country	of Domicile		
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9 Is the business entity affiliate	ed with a financial institution/bank?	Yes		No _				
10 Business Address			(1) City			(1) State	(13)Zip or Foreign Cou	untry
(4) Phone Number	(5) Fax Number		16 Business V	Web Site A	ddress	17 Busine	ss E-Mail Address	
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(18) Mailing Address	(19)	P.O. Box	② City			(21) State	22 Zip or Foreign Cou	untry
	Designated	l/Responsible	e Licensed Proc	lucer				
23 Identify at least one Designate	ed/Responsible Licensed Producer: (Se	e Matrix of Sta	te Requirements a		nseregistry.c	com for jurisdi	ictions that require the	
designated/responsible license	ed producer to be an officer, director of	r partner of the	business entity.)					
	SSN_			=				
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	SSN_			=				
Name	SSN	-	-	_				
	Owners 1	Partners Off	icers and Direc	rtors				
24 Identify all owners with 10% i	interest or voting interest, partners, offi							
Name	Title		SSN/FEIN_	-	-	Owr	ner: Yes / No	
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Name	Title		SSN/FEIN		-	Owr	ner: Yes / No	
							(Stat	te Use)

Jurisdiction and Type of License/Registration Requested

 ${f C}$  – Casualty

P L-Personal Lines

25) Next to each jurisdiction, check the legal business type, license/registration type(s) and line(s) of authority for which you are applying.

Legal Business Type: C – Corporation P – Partnership S – Sole Proprietorship LLC – Limited Liability Company LLP – Limited Liability

Partnership

License/Registration A – Agent B – Broker P – Producer SLP – Surplus Lines Producer Y – Business Entity

Types:
Lines of Authority: V – Variable

- Variable L - Life H - Accident & Health or P - Property

Life/Variable Annuity Sickness

**CP** – Credit Products **O** – Other – Limited Line

				redit Pro				- Limited										
	Legal	Business	<b>Туре</b>		Lie	cense/l	Registra	ation Ty	pe	Jurisdiction			]	Lines of A	Authority	7		
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Background Information		
Please read the following very carefully and answer every question. All copies of documents must be certified. All written statements		
submitted by the Applicant must include an original signature.		
1. Has the business entity or any owner, partner, officer or director ever been convicted of, or is the business entity or any owner, partner, officer or director currently charged with, committing a crime, whether or not adjudication was withheld?	Yes 1	No
"Crime" includes a misdemeanor, felony or a military offense. You may exclude misdemeanor traffic citations and juvenile offenses. "Convicted" includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendre, or having been given probation, a suspended sentence or a fine.		
If you answer yes, you must attach to this application:  a) a written statement explaining the circumstances of each incident,  b) a certified copy of the charging document, and  c) a certified copy of the official document which demonstrates the resolution of the charges or any final judgment		
2. Has the business entity or any owner, partner, officer or director ever been involved in an administrative proceeding regarding any professional or occupational license?	Yes 1	No
"Involved" means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, placed on probation or surrendering a license to resolve an administrative action. "Involved" also means being named as a party to an administrative or arbitration proceeding which is related to a professional or occupational license. "Involved" also means having a license application denied or the act of withdrawing an application to avoid a denial. You may exclude terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.		
If you answer yes, you must attach to this application:  a) a written statement identifying the type of license and explaining the circumstances of each incident,  b) a certified copy of the Notice of Hearing or other document that states the charges and allegations, and  c) a certified copy of the official document which demonstrates the resolution of the charges or any final judgment.		
3. Has any demand been made or judgment rendered against the business entity or any owner, partner, officer or director for overdue monies by an insurer, insured or producer, or have you ever been subject to a bankruptcy proceeding?	Yes 1	No
If you answer yes, submit a statement summarizing the details of the indebtedness and arrangements for repayment.		
4. Has the business entity or any owner, partner, officer or director ever been notified by any jurisdiction to which you are applying of any delinquent tax obligation that is not the subject of a repayment agreement?	Yes 1	No
If you answer yes, identify the jurisdiction(s):		
5. Is the business entity or any owner, partner, officer or director a party to, or ever been found liable in any lawsuit or arbitration proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty?	Yes 1	No
If you answer yes, you must attach to this application:  a) a written statement summarizing the details of each incident,  b) a certified copy of the Petition, Complaint or other document that commenced the lawsuit or arbitration, and  c) a certified copy of the official document which demonstrates the resolution of the charges or any final judgment.		
6. Has the business entity or any owner, partner, officer or director ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct?	Yes 1	No
If you answer yes, you must attach to this application:  a) a written statement summarizing the details of each incident and explaining why you feel this incident should not prevent you from receiving an insurance license, and  b) certified copies of all relevant documents.		

Applicants	Certification	and Attestation
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- The undersigned owner, partner, officer or director of the business entity hereby certifies, under penalty of perjury, that:
- 1. All of the information submitted in this application and attachments is true and complete and I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license or registration revocation and may subject me and the business entity to civil or criminal penalties.
- 2. Where required by law, the business entity hereby designates the Commissioner, Director or Superintendent of Insurance, or an appropriate representative in each jurisdiction for which this application is made to be its agent for service of process regarding all insurance matters in the respective jurisdiction and agree that service upon the Commissioner or Director of that jurisdiction is of the same legal force and validity as personal service upon the business entity.
- 3. The business entity grants permission to the Commissioner or Director of Insurance in each jurisdiction for which this application is made to verify any information supplied with any federal, state or local government agency, current or former employer or insurance company.
- 4. Every owner, partner, officer or director of the business entity either a) does not have a current child-support obligation, or b) has a child-support obligation and is currently in compliance with that obligation.
- 5. I authorize the jurisdictions to give any information they may have concerning me to any federal, state or municipal agency, or any other organization and I release the jurisdictions and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.
- 6. I acknowledge that I understand and will comply with the insurance laws and regulations of the jurisdictions to which I am applying for licensure/registration.
- 7. If required, I have received a Certificate of Good Standing from the jurisdiction's Secretary of State in which I am applying.
- 8. I certify that I am licensed and in good standing in my home state/resident state for the lines of authority requested from the non-resident state.

#### Attachments

- 28) The following attachments must accompany the application otherwise the application may be returned unprocessed or considered deficient.
- 1. Unless otherwise noted in the State Matrix of Business Rules, a state will rely on an electronic verification of an applicant's resident license through the NAIC's Producer Database in lieu of requiring an original Letter of Certification from the resident state.
- 2. Any jurisdiction specific attachments listed in the State Matrix of Business Rules (www.licenseregistry.com).

onth	Day	Year	Signature	
			Typed or Printed Name	
			Title	
			Social Security Number	
			Address	
			City State	Zip

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### Resident & Non-Resident Business Entity Licensing Frequently Asked Questions

Business Entity licensing is effective July 1, 2003. Business entities are expected to be in compliance no later than October 1, 2003. After October 1, 2003, penalties for non-compliance may be enforced.

### What are the definitions of business entity and insurance agency in the West Virginia Code?

"Business entity" means a corporation, association, partnership, limited liability company, or other legal entity.

"Insurance agency" means an individual, corporation, partnership, association, limited liability company, or other legal entity except for an employee of the individual, corporation, partnership, association, limited liability company, or other legal entity, and other than an insurer or an adjuster as defined by 33-12B-1 of the West Virginia Code, which employs individuals licensed to engage in activity or whose members engage in any activity be performed only by a licensed individual insurance producer or solicitor. It shall not include sole proprietor or partnerships in which there is only one licensed insurance producer.

**What types of entities can be licensed?** General partnerships, Limited liability companies, Limited partnerships, Limited liability partnerships, Sole proprietors.

**Does an entity need a license to receive direct commissions?** Entities cannot sell, solicit or negotiate insurance or receive direct commissions, however, producers may assign commissions to an entity. A written assignment must be maintained in the files and available for review by the Insurance Commissioner on request.

Does an entity need a license to receive assigned commissions? YES

What happens if the nonresident applicant's home state does not license agencies? In lieu of a Letter of Certification, a letter from the applicant's home state insurance department that agencies are not licensed must be attached with the application.

Are articles of incorporation organization/partnership agreements required to be submitted with a resident or a nonresident application?

No, applicant attests on the application that the entity is properly registered. Information should be available if requested by the Insurance Commissioner.

Does the entity need to name at least one designated responsible producer on the application? YES

Does the designated responsible producer have to be an officer/director/partner of the agency? YES

Is the agency required to include a list with the application of all agents who may be selling through or on behalf of the agency?

This list not required to be submitted with application, however, should be available upon request by the Insurance Commissioner.

Are agencies appointed to insurance companies? NO

Do designated agents and all other agents in the entity need to be appointed individually? YES

**Does the insurance department need to approve any name, true or DBA prior to licensure?** NO, however, an application may be rejected if a name is misleading or may be the same or so similar to another agency to be misleading.

Are branch offices required to be licensed? Only if the branches are considered separate legal entities.

When do changes in agency officers/directors/partners or changes to the designated responsible producer need to be reported to the Insurance Commissioner? The Insurance Commissioner's office must be notified, in writing, of all changes in status among its members, directors, and officers, and all other individuals designated in the application within ten (10) days after the change.